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FATAL PUERPERAL SEPSIS DUE TO INTRODUCTION OF AN ELM TENT.

BY

THOMAS S. CULLEN, M. B. (TOR.)

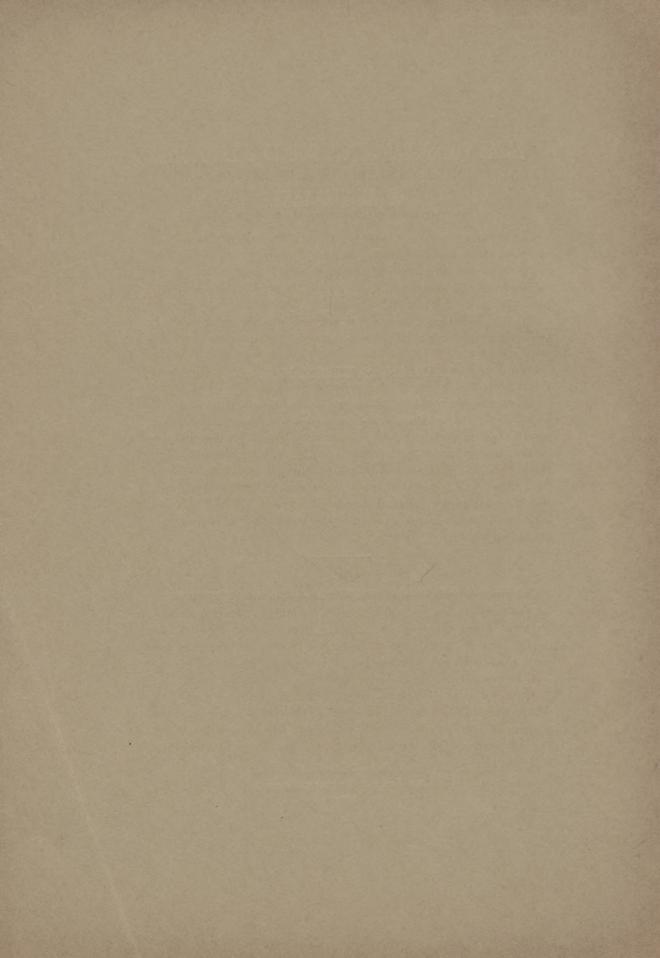
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presented by the author

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FATAL PUERPERAL SEPSIS DUE TO INTRODUCTION OF AN ELM TENT.

BY THOMAS S. CULLEN, M. B. (TOR.)

Unfortunately we have been unable to get a complete history of the case, which occurred seven years ago in a Western State. The patient was a young woman, and on account of some trouble her medical attendant deemed it necessary to produce an abortion. She was about four months pregnant. After administering an anesthetic, a slippery-elm tent was inserted into the uterine cavity. A few hours afterward she turned deathly pale, fainted, falling upon the floor. On recovering she complained of great pain in the abdomen and had a slight uterine hemorrhage. Four days later she got up, and while at stool suffered great pain and had a profuse hemorrhage. Whether the fœtus was then expelled or not is impossible to say. On the morning of the fifth day she had a severe chill, followed by high temperature, marked abdominal distension and extreme tenderness over the entire abdomen. The chills and fever continued at irregular intervals until the sixteenth day. She then showed distinct signs of peritonitis; her pulse was almost imperceptible and fluctuated between 140 and 150; her skin had a bronzed appearance and she was suffering from a low, muttering delirium. Death followed in 12 hours.

AUTOPSY.

An autopsy was granted, but only the abdominal cavity could be examined. The peritoneal cavity contained several quarts of purulent fluid, the coils of intestine were covered by fibrinous deposit, and all the organs were bathed in pus. The uterus was very much enlarged, soft and boggy, and on section its walls were seen to contain many small abscesses.

Examination of alcoholic specimen. Path. No. 869. Plate VII*. The uterus is 13 x 9 x 6 cm., being about the size of a three months' pregnancy. It is covered by a parchment-like membrane, which is easily stripped off, leaving a perfectly smooth surface beneath.



The cervix is 4.5 cm. in diameter and is intact. The cervical canal is 2.5 cm. long, its walls average 1.5 cm. in thickness, and its blood-vessels in the hardened specimen reach 4 mm. in diameter. The uterine walls average 2 cm. in thickness, are very porous, and have a rich blood supply. The uterine cavity is 9 cm. in length. Its inner surface is everywhere covered by a fine shaggy material, which in many places is composed of delicate fibrils or threads. All of this material looks as if it were necrotic. Lying free in the uterine cavity are six pieces of wood, averaging 6 cm. in length, 1.5 cm. in breadth, and 1.2 mm. in thickness.

Right Appendages. The tube is 7 cm. long and approximately 7 mm. in diameter. It is free from adhesions, but is covered by the parchment-like membrane. The parovarium is intact. The ovary is 4.5 x 3.5 x 1.2 cm. It is somewhat lobulated and is also partially covered by the membrane. It is soft and doughy.

Left Appendages. The tube and ovary are too mutilated for examination.

HISTOLOGICAL EXAMINATION.

The tissues have suffered considerably as the result of having been kept so long. The inner surface of the uterus from cervix to fundus is covered by necrotic material, and the walls of the cavity have themselves undergone necrosis. At a few points where the tissue is not necrotic it is seen to be composed of very vascular decidua. Scattered throughout this decidual tissue are a few small uterine glands. Some portions of the decidua show a moderate amount of infiltration with polymorphonuclear leucocytes. On the whole it is remarkable to see how few polymorphonuclear leucocytes are present. The uterine muscle beneath the mucosa has undergone complete necrosis for a depth of from 1 to 1.5 cm. Sections treated with Weigert's fibrin stain show many cocci scattered throughout the necrotic material covering the inner surface of the uterus. These are chiefly found in pairs, but may form short chains. Accompanying the cocci are long, thick bacilli with slightly rounded ends. The small blood-vessels of the uterus are filled with cocci and bacilli, and the larger vessels have masses of these organisms clinging to their walls. The muscle fibres in the vicinity of the vessels have a few cocci scattered between them. The lymphatics appear to contain many organisms. The membrane covering the uterus, tubes and ovaries is composed of fibrin containing a few polymorphonuclear leucocytes in its meshes. This membrane has also been invaded by cocci and bacilli.

The right tube is greatly disorganized, and its epithelium has fallen off. The mucosa is necrotic and shows moderate invasion of polymorphonuclear leucocytes. The muscular coats are normal. In the tube lumen are many cocci and bacilli. The ovary is normal.

The left ovary presents a normal stroma. It contains two small gland-like spaces, and at one or two points small capillaries are filled with cocci. Apart from these, the ovary is normal.

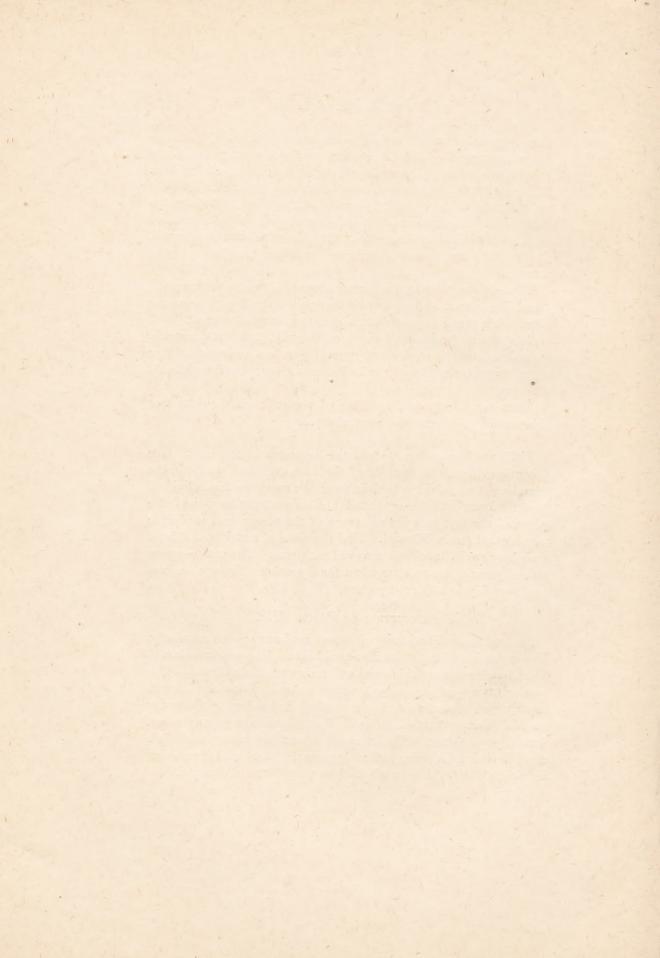
Diagnosis. Necrosis of the uterine walls, moderate metritis, necrosis of the tubal mucosa, general purulent peritonitis. The organism which produced the lesions was a coccus, most probably the streptococcus pyogenes.

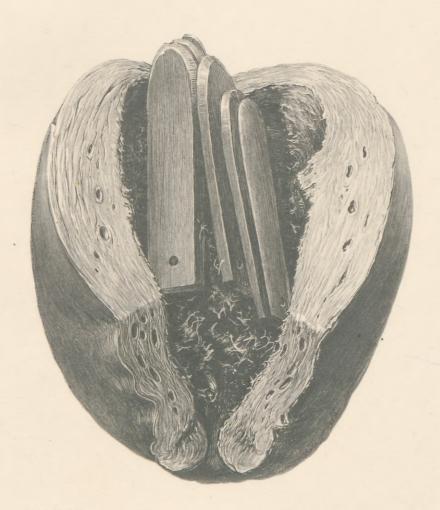
From the history and pathological report it will be seen that this was a typical case of puerperal sepsis.

Little need be said relative to the treatment in this case. One thing is evident, the lamellæ of the tent separated, and without operation it would have been impossible to remove the individual pieces of wood. The continual uterine contraction forced the edges of the tent into the substance of the uterus, and it is little wonder that sepsis followed. Had the cervical canal been dilated the pieces could have been removed with ease. The case occurred several years ago, at a time when the operative technique was not as thoroughly known as at present.

DESCRIPTION OF PLATE VII*.

Natural size. The hardened uterus has been opened anteriorly. The organ is at least twice its normal size. The cervix is intact. The uterine walls are thickened and their vessels are dilated. The uterine cavity presents a shaggy appearance, and near the internal os numerous necrotic shreds are visible. Lying free in the cavity are six pieces of wood. These, when fitted one to the other, form a perfect cone. The lower end of each contains a small hole through which the string evidently passed. These pieces are lying in exactly the position in which they were found at autopsy.





Max Brödel, fec.

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